(b)(6)

U.S. Department of Homeland Security
U.S. Citizenship and Immigration Services
Administrative Appeals Office (AAO)
20 Massachusetts Ave., N.W., MS 2090
Washington, DC 20529-2090

U.S. Citizenship and Immigration Services

DATE: JUN 10 2013 OFFICE: TEXAS SERVICE CENTER FILE:

IN RE: Petitioner:
Beneficiary:

PETITION: Immigrant Petition for Alien Worker as a Member of the Professions Holding an Advanced Degree or an Alien of Exceptional Ability Pursuant to Section 203(b)(2) of the Immigration and Nationality Act, 8 U.S.C. § 1153(b)(2)

ON BEHALF OF PETITIONER:

INSTRUCTIONS:

Enclosed please find the decision of the Administrative Appeals Office in your case. All of the documents related to this matter have been returned to the office that originally decided your case. Please be advised that any further inquiry that you might have concerning your case must be made to that office.

If you believe the AAO inappropriately applied the law in reaching its decision, or you have additional information that you wish to have considered, you may file a motion to reconsider or a motion to reopen in accordance with the instructions on Form I-290B, Notice of Appeal or Motion, with a fee of $630. The specific requirements for filing such a motion can be found at 8 C.F.R. § 103.5. **Do not file any motion directly with the AAO.** Please be aware that 8 C.F.R. § 103.5(a)(1)(i) requires any motion to be filed within 30 days of the decision that the motion seeks to reconsider or reopen.

Thank you,

Ron Rosenberg
Acting Chief, Administrative Appeals Office

DISCUSSION: The Director, Texas Service Center, denied the employment-based immigrant visa petition. The matter is now before the Administrative Appeals Office (AAO) on appeal. The AAO will dismiss the appeal.

The petitioner seeks classification under section 203(b)(2) of the Immigration and Nationality Act (the Act), 8 U.S.C. § 1153(b)(2), as a member of the professions holding an advanced degree. The petitioner seeks employment as a physician specializing in cardiology. At the time he filed the petition, the petitioner was a resident in cardiology at the which provides clinical care to patients in facilities operated by the (VA) in the vicinity of The petitioner asserts that an exemption from the requirement of a job offer, and thus of a labor certification, is in the national interest of the United States. The director found that the petitioner qualifies for classification as a member of the professions holding an advanced degree, but that the petitioner has not established that an exemption from the requirement of a job offer would be in the national interest of the United States.

On appeal, the petitioner submits a brief and a bibliography of his published and presented work.

Section 203(b) of the Act states, in pertinent part:

> (2) Aliens Who Are Members of the Professions Holding Advanced Degrees or Aliens of Exceptional Ability. –
>
> > (A) In General. – Visas shall be made available . . . to qualified immigrants who are members of the professions holding advanced degrees or their equivalent or who because of their exceptional ability in the sciences, arts, or business, will substantially benefit prospectively the national economy, cultural or educational interests, or welfare of the United States, and whose services in the sciences, arts, professions, or business are sought by an employer in the United States.
> >
> > (B) Waiver of Job Offer –
> >
> > > (i) . . . the Attorney General may, when the Attorney General deems it to be in the national interest, waive the requirements of subparagraph (A) that an alien's services in the sciences, arts, professions, or business be sought by an employer in the United States.

The director did not dispute that the petitioner qualifies as a member of the professions holding an advanced degree. The sole issue in contention is whether the petitioner has established that a waiver of the job offer requirement, and thus a labor certification, is in the national interest.

Neither the statute nor the pertinent regulations define the term "national interest." Additionally, Congress did not provide a specific definition of "in the national interest." The Committee on the Judiciary merely noted in its report to the Senate that the committee had "focused on national interest by

increasing the number and proportion of visas for immigrants who would benefit the United States economically and otherwise. . . ." S. Rep. No. 55, 101st Cong., 1st Sess., 11 (1989).

Supplementary information to regulations implementing the Immigration Act of 1990, published at 56 Fed. Reg. 60897, 60900 (November 29, 1991), states:

> The Service [now U.S. Citizenship and Immigration Services (USCIS)] believes it appropriate to leave the application of this test as flexible as possible, although clearly an alien seeking to meet the [national interest] standard must make a showing significantly above that necessary to prove the "prospective national benefit" [required of aliens seeking to qualify as "exceptional."] The burden will rest with the alien to establish that exemption from, or waiver of, the job offer will be in the national interest. Each case is to be judged on its own merits.

In re New York State Dept. of Transportation (*NYSDOT*), 22 I&N Dec. 215 (Act. Assoc. Comm'r 1998), has set forth several factors which must be considered when evaluating a request for a national interest waiver. First, the petitioner must show that the alien seeks employment in an area of substantial intrinsic merit. Next, the petitioner must show that the proposed benefit will be national in scope. Finally, the petitioner must establish that the alien will serve the national interest to a substantially greater degree than would an available United States worker having the same minimum qualifications.

While the national interest waiver hinges on prospective national benefit, the petitioner must establish that the alien's past record justifies projections of future benefit to the national interest. The petitioner's subjective assurance that the alien will, in the future, serve the national interest cannot suffice to establish prospective national benefit. The intention behind the term "prospective" is to require future contributions by the alien, rather than to facilitate the entry of an alien with no demonstrable prior achievements, and whose benefit to the national interest would thus be entirely speculative.

The USCIS regulation at 8 C.F.R. § 204.5(k)(2) defines "exceptional ability" as "a degree of expertise significantly above that ordinarily encountered" in a given area of endeavor. By statute, aliens of exceptional ability are generally subject to the job offer/labor certification requirement; they are not exempt by virtue of their exceptional ability. Therefore, whether a given alien seeks classification as an alien of exceptional ability, or as a member of the professions holding an advanced degree, that alien cannot qualify for a waiver just by demonstrating a degree of expertise significantly above that ordinarily encountered in his or her field of expertise.

The petitioner filed the Form I-140 petition on June 20, 2012. In an accompanying introductory statement, counsel stated: "With the retirement of the baby-boomer generation of physicians, the demand for cardiologists will be dire. The number of cardiologists with added expertise in such life-threatening diseases and disorders as HIV/AIDS and pseudo aneurysm is even smaller." A shortage of qualified workers is not grounds for a national interest waiver under *NYSDOT*. *See id.* at 218. Here, counsel described not an existing shortage, but a foreseen future shortage.

Section 203(b)(2)(B)(ii) of the Act allows physicians in medically underserved areas to sidestep *NYSDOT* by meeting alternative evidentiary requirements, as set forth in the USCIS regulations at 8 C.F.R. § 204.12. The petitioner, however, has not addressed or attempted to meet those requirements, and therefore *NYSDOT* (which does not recognize worker shortages as grounds for the waiver) is the controlling authority in this proceeding.

The intrinsic merit of cardiology and related research are not in dispute, and neither is the national scope of the benefit arising from such research (although the clinical practice of a single cardiologist has a more local impact). The key issues, therefore, are the impact and influence of the petitioner's research work, and the petitioner's prospects for continued research activity (as opposed to a strictly clinical practice).

Counsel claimed that labor certification is not a realistic option for the petitioner:

> Labor certification prohibits a job offer that includes a combination of occupations See 69 Fed Reg 247 at 77394. . . . In the instant case, the record shows that [the petitioner] spends a significant amount of his time performing patient care, research, and teaching.
>
> The Bureau of Labor Statistics Occupational Outlook Handbook (OOH) describes physicians and surgeons duties as "diagnose illnesses and prescribe and administer treatment for people suffering from injury or disease." . . . There is no mention of research or teaching. The OOH describes medical scientists as those performing research on human diseases and conditions with the goal of improving human health. However, many medical scientists are not physicians. . . . Some medical scientists may also be physicians, but they generally work in laboratories instead of the hospital setting with patients.
>
> [The petitioner] does not fall directly under the category of either pure physician or pure researcher, but performs the duties of both. Recent Department of Labor trends indicate that the Department of Labor finds that this type of position involved a combination of occupations. See determination annexed hereto. This means that labor certification for an expert such as [the petitioner] would be prohibited.

The cited entry in the Federal Register promulgated a final rule issuing new Department of Labor (DOL) regulations governing labor certification. The relevant regulation does not match counsel's description. Specifically, the regulation at 20 C.F.R. § 656.17(h)(3), which appears on the cited page of the Federal Register, reads:

> If the job opportunity involves a combination of occupations, the employer must document that it has normally employed persons for that combination of occupations, and/or workers customarily perform the combination of occupations in the area of intended employment, and/or the combination job opportunity is based on a business

> necessity. Combination occupations can be documented by position descriptions and relevant payroll records, and/or letters from other employers stating their workers normally perform the combination of occupations in the area of intended employment, and/or documentation that the combination occupation arises from a business necessity.

The quoted regulation does not, as counsel claimed, "prohibit[] a job offer that includes a combination of occupations." Rather, combination occupations are acceptable, provided the employer is able to document business necessity. Nothing in the record appears to match counsel's vague description of a "determination annexed hereto" from the Department of Labor. Counsel did not show that the Department of Labor has denied labor certification for a combination of teaching, research and clinical care at medical schools where those occupations are routinely combined, as opposed to medical practices or laboratories that typically engage in only one of those activities.

In citing the OOH, counsel discussed the listings for physicians in clinical practice and for medical scientists employed in laboratories. Neither of these descriptions has applied to the petitioner, whose employment in the United States has taken place entirely at medical schools. The petitioner has not shown that medical school faculty members rarely combine teaching, clinical, and research duties. Rather, the record shows that research, teaching, and clinical care all take place at many medical schools and their affiliated hospitals, and thus there is ample reason to believe that medical school faculty members "customarily perform the combination of occupations." As such, labor certification allowing that combination would be available to the petitioner, in the event that a medical school sought to employ him permanently. Because all of the petitioner's research and teaching work has been in the context of his own medical training, still ongoing at the time he filed the petition, it is not evident that the petitioner will continue performing research or teaching, or that any employer will seek his services in those areas, after his own training is complete.

Counsel stated that the petitioner "has published his work in very prominent national and international medical journals," and that his published "research has been cited numerous times by other researchers." Counsel also asserted that the petitioner "has been invited to serve as an Associate Editor of the prestigious medical journal, The petitioner submitted no evidence to establish the prominence and prestige of journals that counsel deemed "prominent" and "prestigious." The unsupported assertions of counsel do not constitute evidence. *See Matter of Obaigbena*, 19 I&N Dec. 533, 534 n.2 (BIA 1988); *Matter of Laureano*, 19 I&N Dec. 1, 3 n.2 (BIA 1983); *Matter of Ramirez-Sanchez*, 17 I&N Dec. 503, 506 (BIA 1980).

The only documentation that the petitioner submitted regarding was a printout of an electronic mail message inviting the petitioner to "become an Associate Editor of That message stated: is a new journal with an open access publication model," with a submission deadline of "May 1, 2012 for [the] 1st issue." The petitioner received the message more than two months before that deadline, on February 21, 2012. The petitioner offered no basis to conclude that was already a "prestigious medical journal" even before it had selected the articles for publication in its debut issue.

The petitioner submitted copies of electronic mail messages inviting him to speak at several conferences, all sponsored by Montreal-based companies with in their name. Portions of a message from Dr president of are nearly identical to passages in a message from Dr. Executive Chair of Anticancer Drugs 2011. These similarities support the conclusion that all of the invitations are from the same ultimate source. The petitioner does not claim any experience, training or expertise in anticancer drugs. Therefore, his invitation to a conference on anticancer drugs does not establish his standing in his field. Rather, it raises questions about Dr. and and the process by which they select and solicit conference attendees. The petitioner submitted copies of messages regarding other conferences, but these other messages simply invited the petitioner to register or to submit manuscripts for consideration. Only the -sponsored conferences promised him a speaking slot.

The petitioner submitted documentation about various research projects in which he has participated. A document dated April 27, 2010 named him as the principal investigator in a study entitled Registry," a principal purpose of which was "[t]o determine if outcomes of patients are different based on treatment with medicine, bypass surgery, or percutaneous coronary intervention (PCI)." The document indicated that the study would take the form of data collection, and that "[n]o additional clinical studies or therapeutic procedures will be performed as part of this Registry solely for research." The purpose of the study was not to introduce any new medical procedure, but to compare the effectiveness of existing ones.

Most of the citations pertain to '
A Comprehensive Review," published in the in 2010. The journal did not publish the article as a "Clinical Investigation" that reported new, original findings. Rather, the article is "a comprehensive review of all relevant English-language articles published from 1966 to December 2009" relating to the medical complication identified in the title. Citations to the review article, therefore, establish its utility as a reference work, rather than as a contribution to medicine in its own right.

The petitioner submitted several witness letters. Dr. dean of the stated that the petitioner "was able to finish requirements of his 42 credit degree course in less than a year" at and that "[t]his is a record as average time to complete a full degree course is 1.5-2 years." Dr. concluded that the petitioner "is one of the top 1% of physicians in this field" and "a national-recognized leader in academic cardiology," who "served [in] leading research positions" at several institutions, including The record indicates that the petitioner's time at was limited to the nine months in 2006-2007 when he studied for his master's degree in public health. Dr. did not explain how studying for a master's degree constitutes a "leading research position." Other witnesses have similarly claimed that the petitioner held "leading roles" while still a graduate student or trainee, without explaining the nature of those roles.

Dr. dean of the stated that the petitioner's "expertise in cardiology has played important leading roles in 1. Limiting health care cost, 2. Increasing health care

efficiency, and 3. Improving patient safety." Dr. cited examples in each of these areas, all of them relating to practices at hospitals where the petitioner has worked. Dr. cited no evidence to show the petitioner's wider influence in those areas.

Professor praised the petitioner as "an excellent caregiver and physician" and "an excellent clinical instructor and teacher." Prof. asserted: "By teaching his superior clinical skills and innovative approaches to others, [the petitioner] is ensuring that future physicians will go on to practice his methods throughout the United States." There is no indication that the phrase "his methods" refers to methods that the petitioner himself developed. Rather, it appears that the petitioner, at an advanced stage in his own training, passes methods he has learned down to more junior medical students. The petitioner has not shown that differs from routine practice in medical schools.

Professor staff physician at stated:

> [The petitioner's] research study published in the is a unique observation and important advancement to the field of Preventive Cardiology. . . . The research has helped to change the method of LDL cholesterol measurement across the in and related Community based outpatient veterans clinics [in the] state of Arkansas.

Prof. is a co-author of the study named above. Prof. implementation of his own findings at the hospital where he works is not evidence of the petitioner's wider impact and influence.

Dr. associate professor at the cited an "acute shortage" of cardiologists, and claimed: "Very few physicians amass this level of education and experience, which makes [the petitioner] essential to the institutions that employ him." Dr. did not specify what he meant by "this level of education and experience"; the sentences preceding that phrase discussed the petitioner's training in specific medical procedures. The more specialized a medical procedure, the smaller will be the number of physicians trained in that procedure. It does not follow, however, that a physician trained in a specialized procedure is inherently superior to other physicians, who may well be trained in different, but equally specialized, procedures that the petitioner is not qualified to perform.

Dr. also asserted that the petitioner "has helped create best practices models for that can soon be replicated nationally in the other in the nation." The record contains no evidence from the Department of Veterans Affairs to indicate plans for national implementation in this way. The specialized waiver provisions at section 203(b)(2)(B)(ii) of the Act apply to physicians at facilities, provided there is a documented job offer from such a facility. The petitioner has not attempted to pursue that route for the waiver.

Dr. clinical associate at stated: "I vouch, without reservations, for [the petitioner's] capabilities as one of the top academic cardiologists in the country." Dr. own expertise is in psychiatry and pathology; her *curriculum vitae* lists no training in cardiology.

The petitioner submitted numerous documents under the heading "Job Offers," including the June 2, 2010 letter from offering him "a full-time (100 percent) faculty appointment as Assistant Professor in the Department of Medicine, Division of General Medicine."

An April 7, 2010 letter offered him "a position as Instructor in Medicine in the at in which the petitioner would devote 70% of his time to clinical practice, reserving "30% . . . for academic endeavors." The position was for one year, from "July 1, 2010 through June 30, 2011."

An unsigned "Physician Employment Agreement" from 2010 offered the petitioner a three-year position with "a medical practice . . . which employs physicians who practice as hospitalists." The "scope of duties" on the agreement focused on "medical services to patients," with the proviso that the petitioner "will not . . . engage in other professional activities including . . . teaching . . . or professional writing to any extent whatsoever" without the employer's prior approval.

The remaining documents that the petitioner identified as "job offers" were not actually job offers. sent the petitioner several messages encouraging him to discuss job openings with two different employers (and an unidentified employer in a . Another recruiter with began her message: "if you or someone you know is interested in exploring Traditional Internal Medicine practice opportunities please forward and share this email with them." The message described positive traits of the area where the employment would take place, but did not directly identify that area or the prospective employer.

None of the above-described materials specifically mentioned cardiology, and therefore the above job offers and solicitations do not indicate demand for the petitioner's services in that specialty.

The only submitted recruitment message specific to cardiology is from another recruiter, which advised that an "[e]stablished Cardiologist group of three seeks a fourth due to expansion." The recruiter did not send this message to the petitioner, and the body of the message does not mention him. Instead, the message went to program coordinator at who forwarded the message to all of the Thus, the message is a general vacancy announcement, brought to his attention not by the employer or the recruiter but by a administrator. That informed the petitioner and other fellows of this opportunity is an indication that did not consider the fellows to be permanent or long-term employees of

A message from the advised the petitioner of an opening for "Director, Consultative Cardiology, " and an "assistant/associate professor, hypertension specialist" at the

These positions relate to the petitioner's medical specialty, but there is no evidence that either university ever contacted the petitioner directly or offered him a position.

On August 13, 2012, the director issued a request for evidence (RFE). The director acknowledged the petitioner's initial evidence, but stated: "As a whole, the evidence does not show that the beneficiary has a past history of achievement with some degree of influence on the field."

In response, counsel stated:

> The materials originally submitted and additional materials attached in the following pages provide clear evidence that [the petitioner's] knowledge and skills are unique. Testimonials from renowned experts, who are considered the foremost leaders in their fields, agree that his expertise, research advancements and leadership in the field of CARDIOLOGY have set him apart from others and have already had a national influence.

Because (as explained previously) the assertions of counsel do not constitute evidence, counsel's use of superlatives such as "prestigious," "leading," "premier," "renowned" and "foremost" do not add weight to the evidence submitted in support of the petition. The evidence must stand on its own merits.

A number of additional witness letters described the petitioner's involvement in various research projects. The witnesses did not indicate that the projects had yielded published papers. Instead, they indicated that the projects were still underway. The record does not establish the existing impact or influence of these projects; best-case predictions of what might eventually arise from the projects are not evidence of impact.

Dr. associate professor at discussed past work by the petitioner, specifically a presentation he made at a 2010 conference. Dr. stated that the petitioner "has contributed evidence that is adopted, and saves the healthcare system millions of dollars in prescriptions for unnecessary cholesterol-lowering medications." The petitioner submitted no supporting documentary evidence, and the passive phrase "evidence . . . is adopted" fails to state who adopted the evidence.

Professor of the editor in chief of the stated that published an article by the petitioner in 2010, and that the journal's " co-editors selected this article to be designated for credit." Prof. stated: "I believe that this designation emphasizes the importance and relevance of the article." The article in question is the petitioner's review article, discussing the existing literature on pseudoaneurysm of the mitral-aortic intervalvular fibrosa.

Counsel claimed: status is awarded to an article only when it is deemed extremely important in the day-to-day practice of physicians." Counsel claimed to have submitted supporting evidence from

the bylaws of the Accreditation Council for Continuing Medical Education (ACCME). The record does not contain ACCME's bylaws as counsel claimed. Instead, the petitioner submitted a June 2008 "Statement" from ACCME regarding "Conflict of Interest in Medical Research, Education, and Practice."

Other witness letters discussed the petitioner's study documented in the initial submission. The witnesses do not indicate that the petitioner has created a new medical procedure, or substantially improved an existing one. At best, the petitioner has collected data to demonstrate the superiority of one existing treatment regimen over others.

Witness letters and other documentation dealt with patient satisfaction and outcomes from his clinical care. These materials may show that the petitioner is an above-average physician, but this does not establish eligibility for the waiver. The petitioner did not show that his clinical abilities brought direct benefits outside of the patients he personally treated and the institutions where he provided the care.

The petitioner documented further citation of his published work, particularly of his 2010 review article, showing only a slight increase in the number of citations. executive editor of the stated that one of the petitioner's articles "has been read/downloaded 4455 times" since its 2010 publication; another from 2011 "has been read/downloaded 5482 times"; and a newly published article from mid-2012 "has been read/downloaded 386 times to date." Ms. did not state that the figures quoted above are significantly higher than those for other articles published at the same time. Devoid of context, the figures have little value. Ms. also stated: "These articles provide information to our readers that can be immediately incorporated into interventional practice with applicability worldwide," but this appears to be true of all published medical research; it is a description of how publication works, rather than a commentary specifically on the petitioner's work.

The petitioner also submitted an invitation to present his work at the 2012 on The message, attributed to Dr. of the shows the same Montreal mailing address as the earlier invitations from Dr.

Another message invited the petitioner to speak at "the on " although the petitioner claims expertise in neither of those fields. Although the symposium was said to be held in the message originated from Montreal. (The symposium's sponsor was identified as a hospital in China.)

A third invitation concerned the organized by The stated purpose of the conference was "to improve higher education institutions and their role in society." The invitation does not explain why the petitioner's work in cardiology is relevant to that goal. All three of these invitations mentioned the same article by the petitioner: "Method of cholesterol measurement influences classification of cholesterol treatment goals: clinical research study," but apart from quoting the title of the article, the invitations

contained no specific discussion of the petitioner's work or even his medical specialty. The invitation to the Houston conference stated:

> The registration fee is $700 USD, which includes the sponsored congress meals, and congress kit: badge, final program, abstract book. A reduced registration fee for students is $500 USD. A $100 USD discount is available if you register by the September 7 [*sic*].

The invitation to the conference contained an almost identical passage, despite supposedly coming from a completely different source:

> The registration fee is €700 euro, which includes the sponsored congress meals, and congress kit: badge, final program, abstract book. A reduced registration fee for students is €500 euro. A €100 euro discount is available if you register by the August 10 [*sic*].

These similar passages, containing the same grammatical mistakes, strongly suggest that the invitations came from the same source, which ties the conference to despite the absence of the address on the invitation.

The invitation to the conference, attributed to one ' refers to the "novel conceptions," rather than "novel concepts," in the petitioner's article. The previously submitted invitation to likewise mentioned the "novel conceptions" in one of the petitioner's articles. Thus, these more recent invitations appear to come from the same source as the earlier invitations, but they no longer acknowledge their common origin.

Counsel has asserted that the petitioner's multiple invitations to present at conferences demonstrate his stature in the field. Those invitations, however, are highly questionable, for reasons explained above. Therefore, the invitations do not support counsel's claims about their significance.

The director denied the petition on December 31, 2012. The director discussed several of the exhibits submitted in support of the petition, but concluded that these materials did not demonstrate the petitioner's impact or influence on his field or show that holding the petitioner to the job offer requirement would be contrary to the national interest.

On appeal, the petitioner raises six main points in his appellate statement. First, he lists various procedures that he can perform, and states that he "possesses exceptional ability in the field of science." Exceptional ability, by statute, is not grounds for the national interest waiver. As stated previously, listing specialized procedures that the petitioner is able to perform does not establish that he stands out in his field. It merely establishes the level and nature of his specialization.

Second, the petitioner states that he "has worked beyond the scope of his duties of physician and enacted clinical protocols . . . at [redacted] [*sic*], [redacted]" and "implemented safe protocols for administration of cardio-toxic drugs to veterans at [redacted]." The implementation of such protocols is local in scope; the petitioner has not established their wider use.

Third, the petitioner asserts that his work "has already substantially benefitted [the] United States national interest in economy," because he is responsible for cost-cutting measures at the [redacted] in [redacted] that "save[] more than 100,000 US$ every year." Again, this benefit appears to be local rather than national in scope. The petitioner has not established wider implementation of the measures, or that the claimed savings are significant at the national level. Even then, the petitioner cited only witness letters to support the claims of cost savings, when direct evidence ought to be available to substantiate those figures.

The petitioner's fourth assertion on appeal is that he presents a greater benefit than other cardiologists because he also holds a master of public health degree, has conducted research, and has held various titles. It cannot suffice to state that, because of these credentials, the petitioner has benefited the United States to a particularly significant degree. The petitioner stated that he "hypothesized, conducted, implemented with results various clinical projects to improve patient safety, improve efficiency of medical care at his institutes, planned to be replicated nationally at all the [redacted] across the country." The petitioner does not cite or submit any documentary evidence to show that the [redacted] has made such plans at the national level, as claimed.

For his fifth point on appeal, the petitioner does not contest the director's finding that the petitioner documented a low number of citations. Instead, the petitioner asserts that "his work is in [a] highly specialized field of interventional cardiology," the unstated implication being that one should not expect heavy citation, given the level of specialization. The petitioner maintains that he has shown his influence in other ways, because his "published [work] has been downloaded thousands of times and articles in [the] [redacted] more than 10,000 times." The petitioner cites no evidence to show that these numbers stand out. Also, a high number of readers establishes opportunities to influence the field, but his published work does not automatically influence every other researcher who reads it. The number of readers says nothing about how many of those readers adopted or agreed with the petitioner's findings. Finally, the assertion that thousands of readers have examined his work seems to contradict his claim that the "highly specialized" nature of that work restricts opportunities for citations.

Finally, the petitioner asserts that "independent international experts in the field" have attested to his eligibility for the waiver. The Board of Immigration Appeals (BIA) has held that testimony should not be disregarded simply because it is "self-serving." *See, e.g., Matter of S-A-*, 22 I&N Dec. 1328, 1332 (BIA 2000) (citing cases). The BIA also held, however: "We not only encourage, but require the introduction of corroborative testimonial and documentary evidence, where available." *Id.* If testimonial evidence lacks specificity, detail, or credibility, there is a greater need for the petitioner to submit corroborative evidence. *Matter of Y-B-*, 21 I&N Dec. 1136 (BIA 1998).

The opinions of experts in the field are not without weight and have received consideration above. USCIS may, in its discretion, use as advisory opinions statements submitted as expert testimony. *See Matter of Caron International*, 19 I&N Dec. 791, 795 (Comm'r 1988). USCIS is, however, ultimately responsible for making the final determination regarding an alien's eligibility for the benefit sought. *Id.* The submission of letters from experts supporting the petition is not presumptive evidence of eligibility; USCIS may, as above, evaluate the content of those letters as to whether they support the alien's eligibility. USCIS may even give less weight to an opinion that is not corroborated, in accord with other information or is in any way questionable. *See id.* at 795; *see also Matter of V-K-*, 24 I&N Dec. 500, 502 n.2 (BIA 2008) (noting that expert opinion testimony does not purport to be evidence as to "fact"). *See also Matter of Soffici*, 22 I&N Dec. 158, 165 (Comm'r 1998) (citing *Matter of Treasure Craft of California*, 14 I&N Dec. 190 (Reg'l Comm'r 1972)).

In this instance, the quality of the supporting documentary evidence does not measure up to the claims set forth in the witness letters. Doubt cast on any aspect of the petitioner's proof may lead to a reevaluation of the reliability and sufficiency of the remaining evidence offered in support of the visa petition. *Matter of Ho*, 19 I&N Dec. 582, 591 (BIA 1988). Truth is to be determined not by the quantity of evidence alone but by its quality. *Matter of E-M-*, 20 I&N Dec. 77, 80 (Comm'r 1989). In this proceeding, the quantity of the evidence submitted surpasses its quality. It is not a question of how many letters the petitioner can submit that refer to him as a leader in his field, but of how well the documentary, non-testimonial evidence supports those assertions. The petitioner has not resolved the tension between two of his claims: that, on the one hand, his published work is too specialized to produce heavy citation; but that, on the other hand, his findings are of widespread interest and have affected patient treatment protocols at hospitals around the world.

The petitioner has documented a productive career, but the record does not contain sufficient reliable documentation to establish, by a preponderance of the evidence, that a waiver of the statutory job offer requirement would be in the national interest of the United States. The petitioner's evidence about shortages is noted, as is his service at a VA facility, but physician waivers taking those factors into consideration fall under a separate statutory provision that the petitioner has not attempted to address or satisfy.

The burden of proof in these proceedings rests solely with the petitioner. Section 291 of the Act, 8 U.S.C. § 1361. The petitioner has not sustained that burden.

ORDER: The appeal is dismissed.